## UNKED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 9-23-05 2 Serial/Patent # 10/533,448				3,448	
3 Please refund the following fee(s):		4 PA NU	PER MBER	5 DATE FILED	6 AMOUNT
Filing					\$
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal		1			\$
Petition			-		\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other				0	\$
		7 TOTAL AMOUNT OF REFUND			\$100.82
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
✓ Overpayment			Cr	edit Depo	osit A/C #:
Duplicate Payment			, 0	2 2	448
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Barbara Can phe// TITLE:					
SIGNATURE: #600) PHONE:					
OFFICE: 407/00/80 Repln. Ref: 09/26/2005 BCAMPBEL 0022020600					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park-One, Room-802B-

PORM PTO 1577 (01/90)